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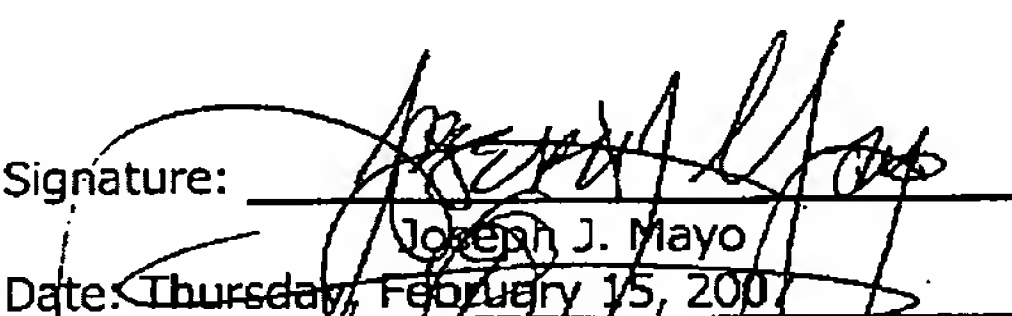
From: JOSEPH J. MAYO (REG. NO. 53,288)
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Total Number of Pages Including Cover: 4
Date: Thursday, February 15, 2007

US Serial No.: 10/710,512
Ref. No.: VR-P0003

Comments:

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Fax Coversheet (1 page) (this sheet) Issue Fee Transmittal (1 page) Fee Transmittal PTOL-85 (1 page) Credit Card Payment Form (1 page)	Signature:  Date: Thursday, February 15, 2007
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

App. No. : 10/710,512
Applicant : KOSELKA, Harvey, et al.
Filed : 7/16/2004
TC/A.U. : 2621
Examiner : HUBER, Jeremiah
Docket : VR-P0003
Customer No. : 36067
Conf. No. : 4511

For: ANGLED AXIS MACHINE VISION SYSTEM AND METHOD

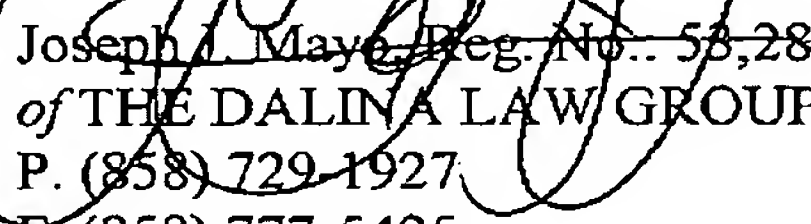
Commissioner for Patents, ISSUE FEE
571-273-2885

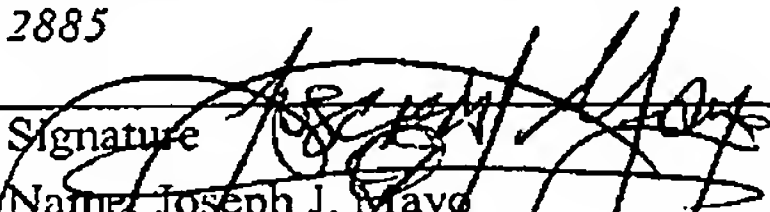
Dear Sir:

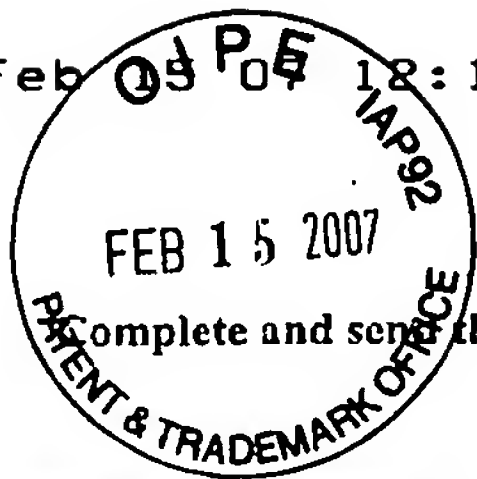
ISSUE FEE TRANSMITTAL

In response to the Notice of Allowance and Fee(s) Due of 11/16/2006, please find the attached Issue Fee Transmittal (PTOL-85) and apply the enclosed Credit Card Payment Form (PTO 2038) towards the \$700 Issue Fee for small entity status and the \$300 Publication Fee for the above referenced application. Please use deposit account 502689 for any other charges not accounted for herein and please reference our file number VR-P0003 if accessing the deposit account.

Respectfully submitted,


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Correspondence Info: Customer Number 36067	CERTIFICATE OF TRANSMISSION <i>I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on <u>February 15, 2007</u> to (571) 273-2885</i>	
	Signature  Name: Joseph J. Mayo	Date: February 15, 2007



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Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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36067 7590 11/16/2006

DALINA LAW GROUP, P.C.
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Joseph J. Mayo (Depositor's name)
 (Signature)
 2/15/2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/710,512	07/16/2004	Harvey Koselka	VR-P0003	4511

TITLE OF INVENTION: ANGLED AXIS MACHINE VISION SYSTEM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	02/16/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUBER, JEREMIAH C	2621	348-042000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
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 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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 2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Vision Robotics Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Diego, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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